

7160 3901 9842 6648 7076

**Certified
Mail
Receipt**Domestic Mail Only
No Insurance
Coverage Provided

Postage	
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.31

Postmark
Here

Sent To:

PHILADELPHIA COUNTY DISTRICT ATTORNEY
1401 ARCH STREET
PHILADELPHIA, PA. 19101

06/30/05 PHILADELPHIA CO.
DISTRICT ATTORNEY RETURNED
UNEXECUTED. AS OF THIS DATE
NEITHER THE PACKAGE OR
CERTIFIED CARD HAVE BEEN
RETURNED BY THE POSTAL
SERVICE.

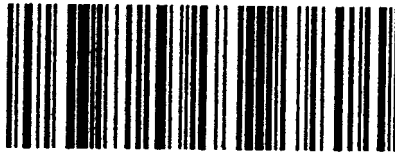
4-310E, O/P, 3/18/05, SRB

PS Form 3800, January 2003

US Postal Service

Certified Mail Receipt

2. Article Number



7160 3901 9842 6648 7069

3. Service Type **CERTIFIED MAIL**4. Restricted Delivery? (Extra Fee) ☐ Yes

1. Article Addressed to:

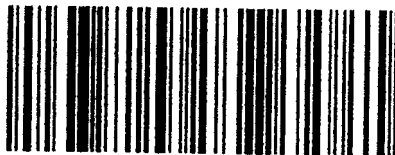
ALLEGANY COUNTY COMMONWEALTH OF PA
564 FORBES AVENUE
6TH FLOOR MANOR BLDG
PITTSBURGH, PA. 15219

4-310E, O/P, 3/18/05, SRB

PS Form 3811, January 2003

Domestic Return Receipt

2. Article Number



7160 3901 9842 6648 7052

3. Service Type **CERTIFIED MAIL**4. Restricted Delivery? (Extra Fee) ☐ Yes

1. Article Addressed to:

MARILYN BROOKS, WARDEN
SCI ALBION
10788 ROUTE 18
ALBION, PA. 16475-0001

4-310E, O/P, 3/18/05, SRB

PS Form 3811, January 2003

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

3/21/05

C. Signature

X Patricia Cleaver Agent
☐ AddresseeD. Is delivery address different from item 1?
If YES, enter delivery address below:☐ Yes
☐ No

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

3-21-05

C. Signature

X M. F. [Signature] Agent
☐ AddresseeD. Is delivery address different from item 1?
If YES, enter delivery address below:☒ Yes
☐ No